

~~PATENT APPLICATION FEE DETERMINATION RECORD~~  
Effective November 10, 1998

**Application or Docket Number**

09925002

**CLAIMS AS FILED - PART**

**(Column 1)**

**(Column 2)**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2) (Column 3)

## SMALL E

**OR SMALL ENTITY**

AMENDMENT A	12/1/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	15	Minus	** 20	= -
Independent	*	4	Minus	*** 3	= 1

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

11. **What is the primary purpose of the following statement?**

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
		OR	
		OR	<del>200</del> 200
		OR	
		OR	
<b>TOTAL</b> ADDITIONAL FEE		<b>TOTAL</b> ADDITIONAL FEE	<del>200</del>

		(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
		OR	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

		(Column 1)	(Column 2)		(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
OR			
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

**\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."**

~~if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."~~

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**CONCLUSION**

In view of the foregoing, it is respectfully submitted that all of the claims pending in this patent application, as amended, are in condition for allowance. If the Examiner has any questions, she is invited to contact the undersigned at (503) 439-6500. Reconsideration of this patent application and early allowance of all the claims is respectfully requested.

Please charge any shortages and credit any overcharges of any fees required for this submission to Deposit Account number 50-3703.

Respectfully submitted,

11/29/05

Dated: \_\_\_\_\_

  
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